| Fill in this information to identify your case: | | | | | | |
|---|--|-------------|-----------|--|--|--|
| Debtor 1 | Robert | R. | Vela | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Sandy | E. | Vela | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | United States Bankruptcy Court for the: NORTHERN DIST. OF CALIFORNIA | | | | | |
| Case number (if known) | 18-50979 SLJ | | | | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

\$12,208.18

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | | Your assets Value of what you ow |
|-------------------------|--|---------------------------------------|
| Sched | ule A/B: Property (Official Form 106A/B) | • |
| 1a. C | copy line 55, Total real estate, from Schedule A/B | \$954,598.3 |
| 1b. C | opy line 62, Total personal property, from Schedule A/B | . \$44,516.9 |
| 1c. C | opy line 63, Total of all property on Schedule A/B | \$999,115.2 |
| Part 2: | Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| | | Amount you owe |
| | Tule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | #4 255 502 4 |
| 2a. C Sched | | \$1,355,592.0 |
| 2a. C Sched 3a. C | copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D *Iule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F) | \$1,355,592.0 |
| 2a. C Sched 3a. C | topy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Fulle E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Fopy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$1,355,592.0 |
| 2a. C Sched 3a. C | copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D For the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D For the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$1,355,592.0 \$0.0 \$753,684.0 |

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum Page 1 of 49 Case: 18-50979 Doc# 19 Filed: 05/29/18 Entered: 05/29/18 15:02:26

Copy your monthly expenses from line 22c of Schedule J.....

Schedule J: Your Expenses (Official Form 106J)

| Deb | otor 1 | Robert R. Vela | | |
|-----|--------|---|--|--------------------|
| Deb | otor 2 | Sandy E. Vela | Case number (if known)18-509 | 79 SLJ |
| P | art 4: | Answer These Questions for Administrative and Statist | ical Records | |
| 6. | Are y | ou filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | | No. You have nothing to report on this part of the form. Check this box and s Yes | ubmit this form to the court with you | r other schedules. |
| 7. | What | kind of debt do you have? | | |
| | | Your debts are primarily consumer debts. Consumer debts are those "incufamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati | | personal, |
| | | Your debts are not primarily consumer debts. You have nothing to report of this form to the court with your other schedules. | on this part of the form. Check this l | box and submit |
| В. | | the Statement of Your Current Monthly Income: Copy your total current mal Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | nonthly income from | |
| 9. | Сору | the following special categories of claims from Part 4, line 6 of Schedul | e <i>E/F:</i> | |
| | | | Total claim | |
| | From | Part 4 on Schedule E/F, copy the following: | | |
| | 9a. | Domestic support obligations. (Copy line 6a.) | | _ |
| | 9b. | Taxes and certain other debts you owe the government. (Copy line 6b.) | | _ |
| | 9c. | Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | <u> </u> | _ |
| | 9d. | Student loans. (Copy line 6f.) | | _ |
| | | Obligations arising out of a separation agreement or divorce that you did not r priority claims. (Copy line 6g.) | eport as | _ |
| | 9f. | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6 | h.) + | _ |

9g. Total. Add lines 9a through 9f.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information
Case: 18-50979 Doc# 19 Filed: 05/29/18 Entered: 05/29/18 15:02:26 Page 2 of 49

| Fill in this information to identify your case and this filing: | | | | | | |
|--|--------------|-------------|-----------|--|--|--|
| Debtor 1 | Robert | R. | Vela | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Sandy | E. | Vela | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: NORTHERN DIST. OF CALIFORNIA | | | | | | |
| Case number | 18-50979 SLJ | | | | | |
| (if known) | | | | | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| Do you own or have any legal or equita | able interest in any residence, building, land | d, or similar property? | | |
|---|---|---|--|--|
| 1.1. 40 - 44 Linden Rd. Street address, if available, or other description | What is the property? Check all that apply. | Do not deduct secured cla amount of any secured cla Creditors Who Have Clain | | |
| Watsonville CA 95076 | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Current value of the entire property? \$950,000.00 | Current value of the portion you own? \$950,000.00 | |
| City State ZIP Code Santa Cruz | Land Investment property Timeshare Other | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | | |
| County Home | Who has an interest in the property? Check one. | Fee Owner | | |
| 2 homes on one parcel of land; Home at 40 Linden Rd 3 bedrooms / 2 bathrooms; Home at 44 Linden Rd 2 bedroom / 1 bath; Home needs work. There are a lot of drainage issues. | □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | Check if this is community property (see instructions) | | |
| | Other information you wish to add about property identification number: 050-2 | • | _ | |

Offici ្រាងទេ 10 នៃ 50979 Doc# 19 Filed: 05 ដែល 18 A/B E ការទទួល 05/29/18 15:02:26 Page 3 of 49 page 1

| | obert R. Vela andy E. Vela | Cas | se number (if known) 18-5 | 0979 SLJ |
|---------------------------|---|--|--|---|
| 1.2. Timeshare | | What is the property? Check all that apply. | Do not deduct secured clai amount of any secured clai | ims on <i>Schedule D:</i> |
| at Paradisus | cation Club at Gran Melia Cancun; 50 year- 42 old, sleeps 4 people, for 1 | n; 50 year- 42 | | S Secured by Property. Current value of the portion you own? \$4,598.33 |
| County | | Land Investment property Timeshare Other | \$4,598.33 \$4,598.33 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. | |
| | | Who has an interest in the property? | Owner | |
| | | Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is comm (see instructions) | nunity property |
| | | Other information you wish to add about property identification number: | this item, such as local | _ |
| | | own for all of your entries from Part 1, incl | | \$954,598.33 |
| Part 2: | Describe Your Vehicles | | • | |
| | s, trucks, tractors, sport utilit | e a vehicle, also report it on <i>Schedule G: Exe</i> | , , , , , , , , , , , , , , , , , , , | |
| 3.1. | | Who has an interest in the property? | Do not deduct secured clai | ms or exemptions. Put the |
| Make: | Cadillac | Check one. | amount of any secured clair Creditors Who Have Claim | |
| Model: | Escalade | Debtor 1 only Debtor 2 only | Current value of the | Current value of the |
| Year: | 2010 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | ileage: 130,000 | At least one of the debtors and another | \$15,587.50 | \$15,587.50 |
| Other information | on: Escalade Sport Utility | Check if this is community property | | |
| 4D; 910 Car | 2 200 alado opolit olimiy | (see instructions) | | |
| 3.2. | | Who has an interest in the property? | Do not deduct secured clai | • |
| Make: | Mercedes | Check one. Debtor 1 only | amount of any secured clair Creditors Who Have Claim | |
| Model: | S550 Sedan 4D | Debtor 2 only | Current value of the | Current value of the |
| Year: | 2007 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | ileage: 105,000 | At least one of the debtors and another | \$9,680.50 | \$9,680.50 |
| 2007 Merced will not pass | es S550 Sedan 4D; Car | Check if this is community property (see instructions) | | |
| 4. Watercraf | t, aircraft, motor homes, ATV | s and other recreational vehicles, other vehicles al watercraft, fishing vessels, snowmobiles, n | | |
| ✓ No ☐ Yes | | | | |

| | tor 1 tor 2 | Robert R. Vela Sandy E. Vela Case number (if known |) _ 18-50979 SLJ |
|-------------|---------------------|---|--|
| 5. | | e dollar value of the portion you own for all of your entries from Part 2, including any for pages you have attached for Part 2. Write that number here | \$25,268.00 |
| P | art 3: | Describe Your Personal and Household Items | |
|)o <u>'</u> | you own | or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ò . | Example | nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware | |
| | ☐ No ✓ Yes | s. Describe See continuation page(s). | \$1,550.00 |
| 7. | Electron Example | nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanne music collections; electronic devices including cell phones, cameras, media players, games | ers; |
| | □ No ✓ Yes | s. Describe See continuation page(s). | \$2,049.99 |
| 3. | | ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | |
| | ✓ No ☐ Yes | s. Describe | |
|) . | | nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sk canoes and kayaks; carpentry tools; musical instruments | cis; |
| | □ No ☑ Yes | s. Describe Sports equipment | \$75.00 |
| 0. | | ns les: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | ✓ No ☐ Yes | s. Describe | |
| 1. | Clothes Example | s es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| | □ No ✓ Yes | s. Describe Clothing | \$500.00 |
| 2. | Jewelry Example | y es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches gold, silver | s, gems, |
| | ☐ No ✓ Yes | Describe Costume jewelry, 5 silver rings, wedding rings, fitbit watch, 1 fossil wa Bulova watch, 1 gold ring and 10 silver necklaces. | atch, 1 \$2,500.00 |
| 3. | | rm animals les: Dogs, cats, birds, horses | |
| | □ No ☑ Yes | s. Describe 1 pet dog, a cat and a bunny rabbit. | \$0.00 |
| 4. | Any oth | ner personal and household items you did not already list, including any health aids you list | |
| | | s. Give specific | |

| | _ | Robert R. Vela Sandy E. Vela | | | Case number | (if known) 18-5 | 50979 SLJ |
|-----|------------------|---------------------------------------|-------------|--|---------------------------|------------------------|---|
| 15. | | | - | entries from Part 3, including any er ber here | | | \$6,674.99 |
| P | art 4: | Describe You | ur Finan | ncial Assets | | | |
| | | | | able interest in any of the following? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Example: | s: Money you hav | e in your | wallet, in your home, in a safe deposit | box, and on hand wher | ı you file your | |
| | □ No | | | | 0.1 | | #00.00 |
| | | Cash on hand. | | 0.00 | Cash | : | \$20.00 |
| | | | | | | | |
| 17. | Deposits | s of money s: Checking, savi | ngs, or otl | alance on day of filing. Amt: \$0. | leposit; shares in credit | | |
| | □ No | institution, list | | ther similar institutions. If you have m | oultiple accounts with th | e same | |
| | | | | Institution name: | | | |
| | 17.1 | . Checking acc | count: | Wells Fargo Bank checking ac | count # -1236 | | (\$342.74) |
| | 17.2 | . Checking acc | count: | Bank of America checking acc | ount # -0105 | | \$246.68 |
| 18. | | nutual funds, or s: Bond funds, in | | raded stocks accounts with brokerage firms, money | market accounts | | |
| | ✓ No ☐ Yes | | Institutio | on or issuer name: | | | |
| 19. | - | - | | erests in incorporated and unincorpo and joint venture | orated businesses, inc | cluding | |
| | | Give specific mation about | | | | | |
| | | | Name o | f entity: | · | % of ownership: | |
| | | | Move (| Capital, LLC | | 50% | \$0.00 |
| | | | VS Dev | velopment, LLC | | 50% | \$0.00 |
| | | | Vela E | states, Inc. | | 100% | \$0.00 |
| | | | Patria | Development, LLC | | 50% | \$0.00 |
| | | | Centra | l Coast Mortgage, Inc. | | 100% | \$0.00 |
| 20. | Negotiab | le instruments inc | lude pers | and other negotiable and non-negoronal checks, cashiers' checks, promise you cannot transfer to someone by s | sory notes, and money | | |
| | infor | Give specific mation about | Issuer n | name: | | | |

| | tor 1 tor 2 | Robert R. Vela Sandy E. Vela | Case number (if know | ∩) _18-5(| 0979 SLJ |
|-----|------------------|--|---|-------------------|---|
| 21. | | ment or pension accounts bles: Interests in IRA, ERISA, profit-sharing plans | Keogh, 401(k), 403(b), thrift savings accounts, or other pension or | | |
| | | s. List each count separately. Type of a | account: Institution name: | | |
| 22. | Your sh Examp | · | outs ou have made so that you may continue service or use from a companids, prepaid rent, public utilities (electric, gas, water), telecommunication | - | |
| 23. | Annuit | s ies (A contract for a specific | Institution name or individual: periodic payment of money to you, either for life or for a number of ye | ars) | |
| | ✓ No ☐ Yes | sIssuer r | name and description: | | |
| 24. | | sts in an education IRA, in a .C. §§ 530(b)(1), 529A(b), an | n account in a qualified ABLE program, or under a qualified state d 529(b)(1). | tuition pro | ogram. |
| | ✓ No | | on name and description. Separately file the records of any interests. | 11 U.S.C. | § 521(c) |
| 25. | | , equitable or future interes s exercisable for your bene | ts in property (other than anything listed in line 1), and rights or fit | | |
| | | s. Give specific ormation about them | | | |
| 26. | | | trade secrets, and other intellectual property; websites, proceeds from royalties and licensing agreements | | |
| | _ | s. Give specific ormation about them | | | |
| 27. | | es, franchises, and other goles: Building permits, exclus | eneral intangibles ive licenses, cooperative association holdings, liquor licenses, profess | ional licen | ses |
| | ш., | s. Give specific ormation about them | | | |
| Mor | ney or p | roperty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | | funds owed to you | | | |
| | abo | s. Give specific information out them, including whether | Federal: 2017 taxes are still being prepared. Amt: Unknown | Federal State: | : Unknown |
| | - | u already filed the returns d the tax years | State: 2017 taxes are still being prepared. Amt: Unknown | Local: | \$0.00 |

| | tor 1 tor 2 | Robert R. Vela Sandy E. Vela | | Cas | e number (if known) _ | 18-50979 SLJ | |
|-----|----------------|--|--|--|--------------------------|---------------------------|------------|
| 29. | Examp | support les: Past due or lump sum a | limony, spousal support, ch | nild support, maintenance | e, divorce settlement, p | roperty settlement | |
| | ✓ No ☐ Yes | s. Give specific information | | | Alimony: | | |
| | _ | | | | Maintenance | : : | _ |
| | | | | | Support: | | |
| | | | | | Divorce settle | ement: | |
| | | | | | Property settl | lement: | |
| 30. | Examp | amounts someone owes your less: Unpaid wages, disability compensation, Social States. Give specific information | rinsurance payments, disal ecurity benefits; unpaid loa | ns you made to someone 0.00 commission to c | else | \$8,050.00 | <u>D</u> |
| 31. | Examp | ts in insurance policies les: Health, disability, or life | insurance; health savings a | account (HSA); credit, ho | meowner's, or renter's i | insurance | |
| | cor | s. Name the insurance npany of each policy d list its value | ompany name: | Benefic | siary: | Surrender or refund value | ə : |
| 32. | If you a | terest in property that is du re the beneficiary of a living to receive property because | trust, expect proceeds from | | or are currently | | |
| | ✓ No ☐ Yes | s. Give specific information | | | | | _ |
| 33. | | against third parties, whet les: Accidents, employment | - | | nand for payment | | |
| | ✓ No ☐ Yes | s. Describe each claim | | | | | _ |
| 34. | | contingent and unliquidated to set off claims | d claims of every nature, i | ncluding counterclaims | of the debtor and | | |
| | ✓ No | s. Describe each claim | | | | | _ |
| 35. | Any fin | ancial assets you did not a | ılready list | | | | |
| | ✓ No ☐ Yes | s. Give specific information | | | | | _ |
| 36. | | e dollar value of all of your ed for Part 4. Write that nu | | | - | → \$7,973.94 | 4 |
| Pa | art 5: | Describe Any Busines | ss-Related Property ` | ou Own or Have a | n Interest In. List | any real estate in Part | : 1 |
| 37. | Do you | own or have any legal or e | equitable interest in any b | usiness-related propert | y? | | |
| | | . Go to Part 6. s. Go to line 38. | | | | | |

| | tor 1 tor 2 | Robert R. Vela Sandy E. Vela Case number (if known) 18-5 | 0979 SLJ |
|-----|----------------|--|---|
| 38 | Accoun | ts receivable or commissions you already earned | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 00. | | is receivable of commissions you amount out nou | |
| | ☐ No ✓ Yes | Describe Received check on 04/26/18 for escrow closing on 529 Park St., Salinas; Deposited check after filing BK | \$4,600.00 |
| 39. | | quipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | |
| | ✓ No ☐ Yes | . Describe | |
| 40. | Machin | ery, fixtures, equipment, supplies you use in business, and tools of your trade | |
| | ☑ No □ Yes | . Describe | |
| 41. | Invento | ry | |
| | ✓ No ☐ Yes | . Describe | |
| 42. | Interest | s in partnerships or joint ventures | |
| | ✓ No | . Describe Name of entity: % of ownership: | |
| 43. | Custom | er lists, mailing lists, or other compilations | |
| | √ No | | |
| | | Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? □ No □ Yes. Describe | |
| 4.4 | A mur haar | | |
| 44. | - | siness-related property you did not already list | |
| | ✓ No ☐ Yes | Give specific information. | |
| 45. | Add the | dollar value of all of your entries from Part 5, including any entries for pages you have | \$4,600.00 |
| Pa | | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a f you own or have an interest in farmland, list it in Part 1. | n Interest In. |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | | Go to Part 7. | |
| | ☐ Yes | Go to line 47. | |
| 47 | Equu- | simala | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 41. | Farm an | nimals es: Livestock, poultry, farm-raised fish | |
| | ✓ No | | |
| | ☐ Yes | | |

| Debi | | Robert R. Vela Sandy E. Vela | Case no | umber (if known) 18- ; | 50979 SLJ |
|------|---------------|--|----------------------|-------------------------------|---------------|
| 48. | Crops | either growing or harvested | | | |
| | | s. Give specific rmation | | | |
| 49. | Farm a | nd fishing equipment, implements, machinery, fixtures, | and tools of trade | | |
| | ✓ No ☐ Yes | i | | | |
| 50. | Farm a | nd fishing supplies, chemicals, and feed | | | |
| | ✓ No ☐ Yes | i | | | |
| 51. | Any far | m- and commercial fishing-related property you did not | already list | | |
| | _ | s. Give specific rmation | | | |
| 52. | | e dollar value of all of your entries from Part 6, including d for Part 6. Write that number here | | | \$0.00 |
| Pa | art 7: | Describe All Property You Own or Have an Int | terest in That You I | Did Not List Above | • |
| 53. | - | have other property of any kind you did not already list es: Season tickets, country club membership | ? | | |
| | ✓ No ☐ Yes | s. Give specific information. | | | |
| 54. | Add the | e dollar value of all of your entries from Part 7. Write tha | t number here | | \$0.00 |
| Pa | art 8: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: | Total real estate, line 2 | | → | \$954,598.33 |
| 56. | Part 2: | Total vehicles, line 5 | \$25,268.00 | | |
| 57. | Part 3: | Total personal and household items, line 15 | \$6,674.99 | | |
| 58. | Part 4: | Total financial assets, line 36 | \$7,973.94 | | |
| 59. | Part 5: | Total business-related property, line 45 | \$4,600.00 | | |
| 60. | Part 6: | Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: | Total other property not listed, line 54 | \$0.00 | | |
| 62. | Total po | ersonal property. Add lines 56 through 61 | \$44,516.93 | Copy personal property total | + \$44,516.93 |
| 63. | Total of | f all property on Schedule A/B. Add line 55 + line 62 | | | \$999,115.26 |

Filed: 05/29/18 15:02:26 Page 10 of page 8 49 Official Constitution Doc# 19

\$50.00

iPhone 6s Plus with a cracked screen.

49

| Fill in this infe | ormation to i | dentify your | case: | | | | | |
|--|--|--|---|--------------------------------|---|--|--|------------|
| Debtor 1 | Robert | R. | Vela | | | | | |
| | First Name | Middle Nam | | | | | | |
| Debtor 2 (Spouse, if filing) | Sandy First Name | E. Middle Nam | Vela e Last Name | | I | | | |
| | | the: NORTHE | RN DIST. OF CALI | FOR | NIA | г | ☐ Check if this is an | |
| Case number (if known) | 18-50979 SLJ | | | | | _ | amended filing | |
| Official Form | 106C | | | | | | | |
| | | erty You Cl | aim as Exemp | ot | | | | 04/16 |
| | • | | • | | | | | |
| Using the property | you listed on <i>Sch</i> Il out and attach t | nedule A/B: Prop o this page as m | erty (Official Form 106 | 6A/B) | as your source, I | ist the propert | le for supplying correct informations that you claim as exemporn the top of any additional | t. If more |
| s to state a specification in state a specification in state of the second in second i | iic dollar amoun e amount of any nefits, and tax-e ⁄⁄6 of fair market | t as exempt. Al applicable stat xempt retireme value under a la | ternatively, you may tutory limit. Some ex nt fundsmay be unl | clair emp imite mptic | n the full fair ma tionssuch as th d in dollar amou on to a particular | rket value of toose for healtont. However, rollar amou | h aids, rights to , if you claim an int and the value of the | |
| Part 1: Ide | ntify the Prop | erty You Cla | aim as Exempt | | | | | |
| I. Which set of | exemptions are | you claiming? | Check one only, | even | if your spouse is | filing with you | | |
| You are o | claiming state and | d federal nonbar | ukruptcy exemptions. J.S.C. § 522(b)(2) | | , | ŭ , | | |
| 2. For any prope | erty you list on S | Schedule A/B th | nat you claim as exen | npt, f | ill in the informa | tion below. | | |
| Brief description of Schedule A/B that | | | Current value of the portion you own | | ount of the mption you clain | • | fic laws that allow exemp | tion |
| | | | Copy the value from Schedule A/B | | ck only one box f h exemption | or | | |
| Brief description: | | | \$950,000.00 | ☑ | \$100.00 100% of fair mai | | . § 703.140(b)(5) | |
| 2 homes on one Linden Rd 3 be Home at 44 Lind Home needs wo drainage issues Parcel: 050-291- | drooms / 2 bad en Rd 2 bedr rk. There are a 05 | hrooms; oom / 1 bath; | | _ | value, up to any applicable statut limit | | | |
| Line from <i>Schedule</i> | e A/B:1.1 | | | | | | | |
| | | | | | | | | |
| • | - | - | more than \$160,3753 | | ed on or after the | date of adjust | tment.) | |
| | | | | | | | | |

Official Form 106C Case: 18-50979 Schedule C: The Property You Claim as Exempt
Doc# 19 Filed: 05/29/18 Entered: 05/29/18 15:02:26 Page 12 of

□ No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Debtor 1 Robert R. Vela
Debtor 2 Sandy F. Vela

ebtor 2 Sandy E. Vela Case number (if known) 18-50979 SLJ

Part 2: **Additional Page Current value of** Amount of the Brief description of the property and line on Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: Unknown \$0.00 C.C.P. § 703.140(b)(5) $\overline{\mathbf{Q}}$ 2017 taxes are still being prepared 100% of fair market value, up to any Line from Schedule A/B: 28 applicable statutory limit Brief description: Unknown C.C.P. § 703.140(b)(5) \$0.00 $\overline{\mathbf{V}}$ 2017 taxes are still being prepared 100% of fair market value, up to any Line from Schedule A/B: 28 applicable statutory limit Brief description: \$8,050.00 \$8,050.00 C.C.P. § 703.140(b)(5) $\overline{\mathbf{M}}$ Open escrows: \$3,500.00 commission to 100% of fair market close 05/18/18 and \$4,550.00 commission value, up to any applicable statutory to close 05/28/18 limit Line from Schedule A/B: Brief description: \$4,600.00 \$4,600.00 C.C.P. § 703.140(b)(5) $\overline{\mathbf{V}}$ Received check on 04/26/18 for escrow 100% of fair market closing on 529 Park St., Salinas; Deposited value, up to any check after filing BK applicable statutory limit Line from Schedule A/B:

| Fill in this info | ormation to ident | ify your case: | | | | |
|--|---|---|-------------------------------|--|---------------------------------|-------------------|
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Name | | | |
| Debtor 2 | | E. | Vela | | | |
| (Spouse, if filing) | Sandy First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DIS | T. OF CALIFORNIA | | | |
| Case number | 18-50979 SLJ | | | | | |
| (if known) | 10 00010 020 | | | | Check if this is amended filing | |
| Official Form | 106D | | | | | , |
| • | | o Hayo Clain | ne Socured by | Proporty | | 12/15 |
| Schedule D: | Creditors wn | o nave Ciain | ns Secured by | Property | | 12/15 |
| No. Che Yes. Fill Part 1: Lis 2. List all secure claim, list the coreditor has a | t All Secured Claims. If a creditor separately for particular claim, list the | t this form to the coun below. ims or has more than one each claim. If more e other creditors in left | e secured than one Part 2. As | edules. You have noth Column A Amount of claim | column B | column C |
| much as poss creditor's nam | ible, list the claims in a e. | | - | Do not deduct the value of collateral | that supports this claim | portion If any |
| 2.1 | | Describe the page secures the cla | • • | \$1,100.00 | \$999.99 | \$100.01 |
| AT&T Creditor's name | | — 1 iphone X | | | | |
| PO Box 10330 Number Street | | _ | | | | |
| As of the date you file, the claim is: Check all that apply. Contingent | | | | | | |
| Date debt was inc | - | Last 4 digits of | account number | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,100.00

Additional Page

After listing any entries on this page, number them sequentially from the previous page.

Column A Amount of claim Do not deduct the value of collateral Column B Value of collateral that supports this

Column C Unsecured portion If any

| 2.2 | Describe the property that secures the claim: | \$14,056.46 | \$950,000.00 | | |
|---|--|-----------------------|---------------------|--|--|
| Franchise Tax Board | | | | | |
| Creditor's name Special Procedures | Property | | | | |
| Number Street | | | | | |
| PO Box 2952 | | | | | |
| | As of the date you file, the claim is: | Check all that apply. | | | |
| | ☐ Contingent | | | | |
| Sacramento CA 95812-2952 | ☐ Unliquidated | | | | |
| City State ZIP Code | Disputed | | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | An agreement you made (such as | mortgage or secured | car loan) | | |
| Debtor 2 only | Statutory lien (such as tax lien, me | echanic's lien) | | | |
| Debtor 1 and Debtor 2 only | Judgment lien from a lawsuit | | | | |
| At least one of the debtors and another | Other (including a right to offset) | | | | |
| | | | | | |
| to a community debt | | | | | |
| Date debt was incurred 03/13/2015 | Last 4 digits of account number | | | | |
| Tax year 2013 | | | | | |
| 2.3 | Describe the property that | #7 004 00 | * 050 000 00 | | |
| | secures the claim: | \$7,821.00 | \$950,000.00 | | |
| Freddie Campos, Jr. Creditor's name | Home | | | | |
| c/o Robert H. Darrow, Esq. | | | | | |
| Number Street 149 Josephine St., Ste. A | | | | | |
| 149 Josephine St., Ste. A | As of the data varifile the eleimin. | Chapte all that apply | | | |
| | As of the date you file, the claim is: | спеск ан тат арргу. | | | |
| Santa Cruz CA 95060 | Contingent Unliquidated | | | | |
| City State ZIP Code | <u> </u> | | | | |
| Who owes the debt? Check one. | | | | | |
| ☐ Debtor 1 only | Nature of lien. Check all that apply. | mortage or cooured | oor loon) | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | | |
| At least one of the debtors and another | ✓ Judgment lien from a lawsuit✓ Other (including a right to offset) | | | | |
| ☐ Check if this claim relates | U Saler (including a right to onset) | | | | |
| to a community debt | | | | | |
| Date debt was incurred 03/16/10 | Last 4 digits of account number | | | | |
| Case # PR 044847; Lien paid in 2008; | Buisness debt | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$21,877.46

| Debtor 1 Debtor 2 | Robert R. V Sandy E. V | | | _ Case number (if | f known) 18-50979 | SLJ |
|--|---|---------------------------------|--|--|---|-----------------------------------|
| Part 1: | | • | this page, number them ous page. | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.4 Hector & N | Maria Sando | wal | Describe the property that secures the claim: | \$100,000.00 | \$950,000.00 | |
| Creditor's nam | ne | vai | Home | | | |
| Debtor 1 Debtor 2 Debtor 1 Debtor 1 Debtor 1 Check i | State the debt? Ch 1 only 2 only 1 and Debtor 2 | eck one. only otors and another | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) | mortgage or secured | l car loan) | |
| | as incurred | 05/26/15 | Last 4 digits of account number | | | |
| 2.5 Internal Re Creditor's nam Centralize | evenue Serv ne d Insolvency | ice y Operations | t Describe the property that secures the claim: Property | \$86,630.28 | \$990,065.27 | \$68,300.85 |
| Number Str PO Box 73 | reet 846 | | | | | |
| Philadelph City | nia PA State | 19101 ZIP Code | As of the date you file, the claim is: Contingent Unliquidated Disputed | Check all that apply. | | |
| ☐ Debtor 1 ☐ Debtor 2 ☑ Debtor 1 | 2 only 1 and Debtor 2 | | Nature of lien. Check all that apply. ☐ An agreement you made (such as ☐ Statutory lien (such as tax lien, mode) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | | l car loan) | |

Add the dollar value of your entries in Column A on this page. Write that number here:

Dischargeable- taxes from 2011, 2012 & 2013; Lien placed on 01/05/18

to a community debt

Date debt was incurred 01/05/18

\$186,630.28

Last 4 digits of account number

Case number (if known) _18-50979 SLJ

Column B

Column A

Column C

| Part 1: | | • | this page, number them ous page. | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | |
|--|---|-----------------------------------|---|--|---|-----------------------------------|--|--|
| 2.6 John Wuu & | & Sze-Ying | Wuu | Describe the property that secures the claim: | \$56,953.06 | \$950,000.00 | \$56,953.06 | | |
| Creditor's name c/o Michael Number Stre | J. Barsi, E | sq. | Home | | | | | |
| Aptos CA 95003 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | | | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | | | | |
| Date debt wa | | 07/25/17 | Last 4 digits of account number | | | | | |
| 2.7 | V00411; Bı | usiness debt | Describe the property that secures the claim: | \$21,740.53 | \$15,587.50 | \$6,153.03 | | |
| Mechanics Creditor's name aka CRB Au Number Stre P.O. Box 98 | ito et | Finance Div. | 2010 Cadillac Escalade Sport Utility 4D (approx. 1 | | | | | |
| Las Vegas City Who owes th Debtor 1 c Debtor 2 c Debtor 1 c At least o Check if | NV State e debt? Ch only only and Debtor 2 ne of the debt this claim re | eck one. conly otors and another | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) | mortgage or secured | car loan) | | | |
| Date debt wa | munity debt s incurred | 11/13/2016 | Last 4 digits of account number | 1 0 0 1 | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

910 Car

\$78,693.59

| Debtor 1 Robert R. Ve Sandy E. Vela | | | _ Case number (if | known) 18-50979 S | iLJ |
|---|-------------------------------|---|--|---|-----------------------------------|
| | _ | this page, number them ous page. | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| PennyMac Loan Service Creditor's name Attn: Bankruptcy Number Street PO Box 514357 | es | Describe the property that secures the claim: Home | \$620,727.65 | \$950,000.00 | |
| City State : Who owes the debt? Chec □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 on □ At least one of the debto ☑ Check if this claim related | nly ors and another | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) | mortgage or secured | car loan) | |
| to a community debt Date debt was incurred 0 |)2/04/15 | Last 4 digits of account number | 4 6 5 6 | | |
| 1st Deed of Trust; Trial I | loan modificat | tion | | | |
| Santa Cruz County Tax (Creditor's name Room 150 County Government Street | | Describe the property that secures the claim: Home | \$414.76 | \$950,000.00 | \$414.76 |
| | nly ors and another tes | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) | mortgage or secured | car loan) | |

Taxes 2014-2015; Lien 07/19/2016 on Debtor's home; Debt is property taxes owed on a property that was owned by one of the debtor's companies and has been foreclosed

Add the dollar value of your entries in Column A on this page. Write that number here:

\$621,142.41

| | | 4 |
|------|----|---|
| Part | 1: | 4 |

Additional Page

After listing any entries on this page, number them sequentially from the previous page.

Column A Amount of claim Do not deduct the value of collateral Column B Value of collateral that supports this

Column C Unsecured portion If any

| | | | | • | | | | |
|---|---|--|--------------|--------------|--|--|--|--|
| 2.10 | Describe the property that secures the claim: | \$310,000.00 | \$950,000.00 | \$102,605.11 | | | | |
| Vincent Liu | Home | | | | | | | |
| Creditor's name c/o Jeffrey P. Widman, Esq. | Tiome | | | | | | | |
| Number Street Law Offices of Jeffrey P. Widman | | | | | | | | |
| 101 Race Street, Suite 100 | As of the date you file, the claim is: Contingent | Check all that apply. | | | | | | |
| San Jose CA 95126 City State ZIP Code | Unliquidated Disputed | | | | | | | |
| Who owes the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | _ | An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | | | | | | |
| Check if this claim relates to a community debt | | | | | | | | |
| Date debt was incurred 04/25/16 | Last 4 digits of account number | | | | | | | |
| Full Plaintiff: Vincent Liu & Black Sta | - llion Investments, LLC; | | s debt | | | | | |
| 2.11 | Describe the property that secures the claim: | \$6,148.34 | \$9,680.50 | | | | | |
| Wells Fargo Dealer Services Creditor's name MAC T9017-026 | 2007 Mercedes S550 Sedan 4D (approx. 105,000 miles | | | | | | | |
| Number Street PO Box 168048 | | | | | | | | |
| | As of the date you file, the claim is: Contingent | Check all that apply. | | | | | | |
| Irving TX 75016-8048 City State ZIP Code | Unliquidated Disputed | | | | | | | |
| Who owes the debt? Check one. ☐ Debtor 1 only | Nature of lien. Check all that apply. | mortage or occured on | * loop) | | | | | |
| Debtor 2 only | An agreement you made (such as | | r ioan) | | | | | |
| ☑ Debtor 1 and Debtor 2 only☑ At least one of the debtors and another | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | | | | | | | |
| Check if this claim relates to a community debt | | | | | | | | |
| Date debt was incurred 09/23/2013 | Last 4 digits of account number | 1 9 9 1 | | | | | | |
| Arrears \$1.633.30 | | | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$316,148.34

| Sandy E. Vela | Case number (if known) _ 18-50979 SLJ | | | SLJ | | |
|---|---|--|--|--|--|--|
| Additional Page After listing any entries on this page, number them sequentially from the previous page. Describe the property that secures the claim: Home As of the date you file, the claim is Contingent Unliquidated Disputed Nature of lien. Check all that apply or 2 only or 1 and Debtor 2 only ast one of the debtors and another. Additional Page Describe the property that secures the claim: Home As of the date you file, the claim is Contingent Unliquidated Disputed Nature of lien. Check all that apply or 2 only Statutory lien (such as tax lien, number of the debtors and another) Describe the property that secures the claim: Home | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | | |
| | | \$130,000.00 | \$950,000.00 | \$130,000.00 | | |
| ne Iissa Ct. | - Home - | | | | | |
| | Contingent Unliquidated | Check all that apply. | | | | |
| 1 only 2 only 1 and Debtor 2 only t one of the debtors and another | Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | | | | | |
| | Additional Page After listing any entries on a sequentially from the previous properties. Dai me lissa Ct. treet CA 95014 State ZIP Code the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates | Additional Page After listing any entries on this page, number them sequentially from the previous page. Describe the property that secures the claim: Home As of the date you file, the claim is: Contingent Unliquidated Disputed the debt? Check one. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates | Additional Page After listing any entries on this page, number them sequentially from the previous page. Describe the property that secures the claim: Home As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code Disputed Nature of lien. Check all that apply. Only 1 and Debtor 2 only t one of the debtors and another if this claim relates Column A Amount of claim Do not deduct the value of collateral \$130,000.00 \$\text{Amount of claim} \text{Do not deduct the value of collateral} \$\text{\$130,000.00}\$ An of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | Additional Page After listing any entries on this page, number them sequentially from the previous page. Describe the property that secures the claim: Home As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. 1 only 2 only 1 and Debtor 2 only t one of the debtors and another if this claim relates Case number (if known) 18-50979 Statum A Amount of claim Do not deduct the value of collateral that supports this claim Value of collateral that supports this claim Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | |

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

Date debt was incurred 05/25/17

3rd Deed of Trust; 40% business debt

\$130,000.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$1,355,592.08

| | | | | 1 | | |
|---|--|---|---|---|--|----------------------------------|
| Fill in this inf | ormation to id | lentify your c | ase: | | | |
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Name | | | |
| Dalitano | | | | | | |
| Debtor 2 (Spouse, if filing) | Sandy First Name | E. Middle Name | Vela Last Name | | | |
| United States Bar | nkruptcy Court for | the: NORTHER | RN DIST. OF CALIFORNIA | | | |
| Case number (if known) | 18-50979 SLJ | | | | Check if this is a amended filing | an |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Creditors | s Who Hav | e Unsecured Claims | | | 12/15 |
| on Schedule A/B: Do not include an If more space is n to this page. On t | Property (Officially creditors with pleeded, copy the line top of any add | I Form 106A/B) a partially secured Part you need, fi litional pages, w | racts or unexpired leases that coul and on Schedule G: Executory Could claims that are listed in Schedule ill it out, number the entries in the write your name and case number (secured Claims | ntracts and Unexpire D: Creditors Who Hoboxes on the left. At | d Leases (Officia old Claims Secure | l Form 106G). ed by Property. |
| | tors have priority | unsecured clair | ms against you? | | | |
| □ No. Go t | | | | | | |
| Yes. | | | | | | |
| claim. For ea show both prio more space is claim, list the | ch claim listed, ide prity and nonpriorit s needed for priorit other creditors in I | entify what type or ny amounts. As n y unsecured clair Part 3. | creditor has more than one priority uf claim it is. If a claim has both priorinuch as possible, list the claims in along, fill out the Continuation Page of I e instructions for this form in the instructions. | ty and nonpriority amo phabetical order acco Part 1. If more than o | ounts, list that clair rding to the credito | m here and or's name. If |
| | | | | Total Claim | amount | amount |
| 2.1 | | | | \$0.00 | \$0.00 | \$0.00 |
| Franchise Tax B | Board | | | | \$0.00 | \$0.00 |
| Priority Creditor's Nam | ie | | Last 4 digits of account number | | | |
| Special Procedu Number Street | ires | | When was the debt incurred? | | - | |
| PO Box 2952 | | | As of the date you file, the claim | is: Check all that app | ly. | |
| Sacramento City | | 95812-2952 ZIP Code | Contingent Unliquidated Disputed | | | |
| Who incurred the | debt? Check o | ne. | Type of PRIORITY unsecured cla | im: | | |
| Debtor 1 only Debtor 2 only Debtor 1 and D At least one of | Debtor 2 only the debtors and a | nother | ☐ Domestic support obligations ☐ Taxes and certain other debts ☐ Claims for death or personal in intoxicated | | ent | |
| Check if this o | claim is for a com | | Other. Specify | | | |
| ✓ No Yes | | | | | | |
| 2017 unknown a | amount | | | | | |

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) 18-50979 SLJ Part 1: Your PRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim Priority** Nonpriority previous page. amount amount 2.2 \$0.00 \$0.00 \$0.00 **Internal Revenue Service** - Last 4 digits of account number Priority Creditor's Name **Centralized Insolvency Operations** When was the debt incurred? Number PO Box 7346 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Philadelphia PA 19101 Disputed State ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: ☐ Debtor 1 only ☐ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated Check if this claim is for a community debt Other. Specify

Is the claim subject to offset?

2017- unknown amount

| Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela | Case number (if known) _ 18-50979 SLJ | |
|---|--|------|
| Part 2: List All of Your NONPRIORITY | Y Unsecured Claims | |
| Yes List all of your nonpriority unsecured claims if a creditor has more than one nonpriority unsecutype of claim it is. Do not list claims already inclined. | claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in nsecured claims, fill out the Continuation Page of Part 2. Total claim | 1 |
| 4.1 | \$7,960 | 6.20 |
| Abbott, Stringham & Lynch Nonpriority Creditor's Name 1530 Meridian Ave, 2nd Floor Number Street | Last 4 digits of account number 7 7 0 4 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| San Jose City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Goods and services | |
| American Express Nonpriority Creditor's Name PO Box 981532 Number Street EI Paso TX 79998 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card | 0.00 |

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$613.00 Capital One Last 4 digits of account number <u>1 8 7 5</u> Nonpriority Creditor's Name When was the debt incurred? 15000 Capital One Drive As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated □ Disputed Richmond VA 23238 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ■ Debtor 1 only Obligations arising out of a separation agreement or divorce ☐ Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes 4.4 \$23,902.00 Last 4 digits of account number **Chase Card Services** 4 2 7 3 Nonpriority Creditor's Name When was the debt incurred? Attn: Correspondence As of the date you file, the claim is: Check all that apply. Stre Number PO Box 15278 ☐ Contingent Unliquidated Disputed Wilmington DE 19850 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes 4.5 \$771.00 Citibank/ The Home Depot Last 4 digits of account number 2 4 2 2 Nonpriority Creditor's Name When was the debt incurred? Citicorp Cr Srvs/ Centralized As of the date you file, the claim is: Check all that apply. Number Street **Bankruptcy** Contingent ☐ Unliquidated PO Box 790040 Disputed

St Louis MO 63129 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Charge Account** Is the claim subject to offset? **☑** No Yes

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.6 \$0.00 Citicards Cbna Last 4 digits of account number <u>6 9 5 5</u> Nonpriority Creditor's Name When was the debt incurred? PO Box 6241 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated ☐ Disputed Sioux Falls SD 57117 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes 4.7 \$1,863.40 Last 4 digits of account number Club Melia Nonpriority Creditor's Name When was the debt incurred? 9500 S. Dadeland Blvd., Suite 3000 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed Miami FL 33156 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only

that you did not report as priority claims

Other. Specify

Arrearage

Debts to pension or profit-sharing plans, and other similar debts

Official CAS G:06 P-50979

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Timeshare maintenance fees

☑ No Yes

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.8 \$3,553.00 Costco Go Anywhere Citicard Last 4 digits of account number 7 1 4 2 Nonpriority Creditor's Name When was the debt incurred? Centralized BK/Citicorp Credit Card Srvs Number As of the date you file, the claim is: Check all that apply. PO Box 790040 ☐ Contingent Unliquidated ☐ Disputed MO 63179 St Louis State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No ☐ Yes 4.9 \$35,645.30 Last 4 digits of account number Ernesto Castro, Jr. Nonpriority Creditor's Name When was the debt incurred? 01/05/17 c/o Aerin Murphy As of the date you file, the claim is: Check all that apply. Number Stree Hudson, Martin, Ferrante, Street, et al. ☐ Contingent Unliquidated 490 Calle Principal ✓ Disputed Monterey CA 93940 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only

Lawsuit

Debts to pension or profit-sharing plans, and other similar debts

At least one of the debtors and another

Is the claim subject to offset?

Case # 17CV000053

☑ No Yes

Check if this claim is for a community debt

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.10 \$120,000,00 **Hubert Yu** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o Michael E. Stone As of the date you file, the claim is: Check all that apply. Siegel Law Firm ☐ Contingent Unliquidated 1726 Seabright Ave. ☐ Disputed Santa Cruz 95062 CA State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Lawsuit Is the claim subject to offset? **☑** No Yes 17CV03217; Full name of plaintiff: Hubert Yu, Trustee of the Yuan Holding LLC Pension Plan Trust; Full name of defendant: Robert Vela, Sandy Vela, Central Coast Mortgage LLC, VS Development LLC, Does 1-10; Case # 17CV03217; Business debt 4.11 \$875.00 Kohl's/ Capital One Last 4 digits of account number 5 2 8 1 Nonpriority Creditor's Name When was the debt incurred? Kohl's Credit As of the date you file, the claim is: Check all that apply. Number P.O. Box 3043 ☐ Contingent Unliquidated □ Disputed WI Milwaukee 53201-3043 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card**

Is the claim subject to offset?

☑ No Yes Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.12 \$19.644.46 **Leonel Martinez** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 03/01/05 c/o David Cortez Number As of the date you file, the claim is: Check all that apply. Street 32 E. Alisal St., #209 ☐ Contingent Unliquidated ☐ Disputed **Salinas** 93901 CA State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ■ Debtor 1 only Obligations arising out of a separation agreement or divorce ☐ Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Lawsuit Is the claim subject to offset? **☑** No Yes Case # M70139; Renewal of Judgment 12/09/14 \$2,663.00 LVNV Funding/ Resurgent Capital Last 4 digits of account number <u>4</u> <u>9</u> <u>0</u> <u>5</u> Nonpriority Creditor's Name When was the debt incurred? PO Box 10497 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed SC Greenville 29603 ZIP Code Type of NONPRIORITY unsecured claim:

☐ Student loans

Other. Specify

Obligations arising out of a separation agreement or divorce

Factoring Company Account Credit One Bank N.A.

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Who incurred the debt?

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 only

☑ No Yes

Debtor 2 only

Check one.

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.14 \$31,675.00 **Mark Stephens** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 02/09/2017 c/o Brad C. Brereton Number As of the date you file, the claim is: Check all that apply. Street **Brereton Law Office** ☐ Contingent Unliquidated 1362 Pacific Ave, Suite 220 ✓ Disputed Santa Cruz 95060 CA ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Lawsuit Is the claim subject to offset? **☑** No Yes Case # 17CV00430 4.15 \$0.00 Michael Smith Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Manning & Kass As of the date you file, the claim is: Check all that apply. Number Street Ellrod, Ramirez, Trester LLP ☐ Contingent Unliquidated 333 Bush St., 27th Floor □ Disputed

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

Other. Specify

Professional services

☐ Yes Cases # 17CV00430 & # 17CV000053; Attorney for Debtors

CA

State

Check one.

San Francisco

Debtor 1 only

Debtor 2 only

Who incurred the debt?

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

City

☑ No

94104

ZIP Code

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.16 \$324.938.41 Miguel Soriano Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 08/21/2009 504 Winchester Dr. As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated □ Disputed Watsonville 95076 CA State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Agreement Is the claim subject to offset? **☑** No Yes Case # 18CV01220 (amount includes the accrued interest); Business debt 4.17 \$98,033.56 Pablo Romero Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 07/03/17 c/o James J. Cook, Esq As of the date you file, the claim is: Check all that apply. Number **Horan LLoyd** ☐ Contingent Unliquidated 26385 Carmel Rancho Blvd, Ste 200 □ Disputed Carmel CA 93923 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Lawsuit

Is the claim subject to offset?

Case # 17CV001497; Business debt

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.18 \$4.928.00 Rocio D. Rivera Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 471 Main St. As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated □ Disputed Watsonville 95076 CA State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Lawsuit Is the claim subject to offset? **☑** No Yes Case # WS050324; Small claims; Both parties Pro Se 4.19 \$2,818.00 Target Last 4 digits of account number 4 2 8 0 Nonpriority Creditor's Name When was the debt incurred? c/o Financial & Retail Srvs As of the date you file, the claim is: Check all that apply. Mailstopn BT POB 9475 ☐ Contingent Unliquidated Disputed Minneapolis MN 55440 ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only

At least one of the debtors and another

Is the claim subject to offset?

☑ No Yes

Check if this claim is for a community debt

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

Credit Card

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.20 \$13,000,00 Terra Law LLP Last 4 digits of account number <u>6</u> <u>8</u> <u>3</u> <u>6</u> Nonpriority Creditor's Name When was the debt incurred? 50 W. San Fernando St., Suite 1415 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated □ Disputed San Jose 95113 CA State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Attorney Fees** Is the claim subject to offset? **☑** No Yes Re lawsuit Vincent Lui and Black Stallion Investments, LLC \$1,852.00 0 1 0 0 Visa Dept. Store National Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Bank/ Macy's As of the date you file, the claim is: Check all that apply. Number Attn: Bankruptcy ☐ Contingent Unliquidated PO Box 8053 Disputed OH 45040 Mason State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset?

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.22 \$50,000,00 VS Development, LLC Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 40 Linden Rd. As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated □ Disputed Watsonville 95076 CA City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify $\mathbf{\Lambda}$ Check if this claim is for a community debt Is the claim subject to offset? **☑** No Yes Capital Contribution owed by debtors \$342.74 Wells Fargo Bank, N.A. (114) Last 4 digits of account number 1 2 3 6 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6995 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed **Portland** OR 97228-6995 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Checking Account**

Is the claim subject to offset?

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela Case number (if known) _18-50979 SLJ Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.24 \$4,927.78 Wells Fargo SBL Last 4 digits of account number 2 4 8 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 29482 As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed **Phoenix** 85038-8650 ΑZ State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes Card in VS Development, LLC's name 4.25 \$3,672.43 2 4 7 0 Wells Fargo SBL Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 29482 As of the date you file, the claim is: Check all that apply. Number ☐ Contingent Unliquidated Disputed **Phoenix** ΑZ 85038-8650 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify

Credit Card

Check if this claim is for a community debt

Card in VS Development, LLC's name

Is the claim subject to offset?

| Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela | Case number (if known) 18-50979 SLJ | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| Part 3: List Others to Be Notified Abou | ut a Debt That You Already Listed | | | | | | | |
| 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. | | | | | | | | |
| Atty Gen, US Dept of Justice | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | | | |
| Name Civil Trial Sec., Western Reg. | Lineof (Check one): | | | | | | | |
| Number Street PO Box 683, Ben Franklin Stat. | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | | | |
| Washington DC 20044 City State ZIP Code | — Last 4 digits of account number | | | | | | | |
| ChexSystems | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | | | |
| Name Consumer Relations | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | | | | |
| Number Street 7805 Hudson Rd., #100 | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | | | |
| Woodbury MN 55125 City State ZIP Code | — Last 4 digits of account number | | | | | | | |

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

of (Check one): Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Members of VS Development, LLC; Each has 25%

CA

95076 ZIP Code

Hector & Maria Sandoval Name

189 Manana Land

Number

Watsonville

| Hubert Yu Name c/o Pacific Elite Fund, Inc. Number Street 1260 Oakmead Pkwy, Suite 210 | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
|--|-----------|-----------------------|---|--|--|--|
| | | | Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Sunnyvale City | | 1085 P Code | Last 4 digits of account number | | | |
| Internal Revenue Name Insolvency, MS 54 Number Street Special Procedure | 120/5430 | | On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| 55 S. Market St. | State ZIF | P Code | Last 4 digits of account number | | | |

Debtor 1 Robert R. Vela
Debtor 2 Sandy E. Vela

Case number (if known) 18-50979 SLJ

| Part 3: List C | thers to B | e Notified Abou | it a Debt Th | nat Y | ou Already | / Lis | sted Continuation Page |
|----------------------------------|------------------------|-------------------------------|-----------------|--|----------------|-------|--|
| Josefina Garcia-Ledezma | | | On which e | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name 44 Linden Rd. Number Street | | | _ Line | _of | (Check one): | | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | - Last 4 digit | ts of a | ccount num | ber | |
| Watsonville | CA | 95076 | _ | | | | |
| City Renter | State | ZIP Code | | | | | |
| Mechanics Bank | | | On which e | entry | in Part 1 or P | art 2 | 2 did you list the original creditor? |
| Name aka CRB Auto | | | Line | of | (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street Attn: Legal Dept | | | | _ | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| PO Box 253850 | | | – I ast 4 digit | ts of a | ccount num | her | 1 0 0 1 |
| Santa Ana | CA | 92799 | | .5 0. 0 | iooouni num | | <u> </u> |
| City Another address | State | ZIP Code | | | | | |
| Melissa C. Shaw | | | On which e | entry | in Part 1 or P | art 2 | 2 did you list the original creditor? |
| Name The Grunsky Law I | Firm PC | | Line | of | (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street 240 Westgage Dr. | | | | | , | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | - Last 4 digit | ts of a | ccount num | ber | |
| Watsonville City | CA State | 95076 ZIP Code | _ | | | | |
| Case # 17CV03217 | : Attorney fo | or VS Developme | ent, LLC | | | | |
| Miguel A. Soriano- | Treu | | On which e | entry | in Part 1 or P | art 2 | 2 did you list the original creditor? |
| Name c/o Law Office Of T | ony Escare | no | Line | of | (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street 54 Penny Ln. | • | | - - | _ | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | - Last 4 digit | ts of a | ccount num | ber | |
| Watsonville | CA | 95076 | _ | | | | |
| City Creditor obtained a | State attorney afte | ZIP Code er BK case filed. | | | | | |
| Mortgage Electron | ic Registrati | ion Systems | On which e | entry | in Part 1 or P | art 2 | 2 did you list the original creditor? |
| acting for Bay Equ | ity LLC | | Line | of | (Check one): | | Part 1: Creditors with Priority Unsecured Claims |
| Number Street 2300 Clayton Road | , Suite 450 | | _ | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | - Last 4 digit | ts of a | ccount num | ber | |
| Concord City | CA State | 94520 ZIP Code | _ | | | | |
| • | | | | | | | |
| 1st Deed of Trust (| Another add | 11 <i>000)</i> | | | | | |

Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela

Case number (if known) 18-50979 SLJ

| Pablo Romero Name | | | On which er | ntry in Part 1 or F | art 2 | 2 did you list the original creditor? |
|---|-------------|-----------------------|-----------------|---------------------|--------|---|
| 25 Carmel Ave | | | Line | of (Check one): | | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | _ | _ | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | — Last 4 digits | of account num | ber | |
| Salinas City | CA State | 93907 ZIP Code | | | | |
| Member of Patria Deve | | | 6 | | | |
| Pamela D. Simmons | | | On which er | ntry in Part 1 or F | art 2 | 2 did you list the original creditor? |
| Name Law Office of Simmons | & Purc | lv | Line | of (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street 2425 Porter Street, Suit | | -, | | al services | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | — Last 4 digits | of account num | ber | |
| Soquel City | CA State | 95073 ZIP Code | | | | |
| Case # 17CV03217; Att | | | | | | |
| Roy Tovar | | | On which er | ntry in Part 1 or F | Part 2 | 2 did you list the original creditor? |
| 7 Packard Lane | | | Line | of (Check one): | | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | _ | _ | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | 05070 | — Last 4 digits | of account num | ber | |
| Watsonville City | CA State | 95076 ZIP Code | | | | |
| Debt of Central Coast N | | | | | | |
| U.S. Atty, Chief Tax Div | rision | | On which er | ntry in Part 1 or F | art 2 | 2 did you list the original creditor? |
| Name 450 Golden Gate Ave. | | | Line | of (Check one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | _ ` ` | | Part 2: Creditors with Nonpriority Unsecured Claims |
| 10th Floor, Box 36055 | | | | | Ч | . a. z. c. cancio mar venprioni, cricco de ciamio |
| | | | — Last 4 digits | of account num | ber | |
| San Francisco | CA | 94102 ZIP Code | | | | |
| City | State | ZIP Code | | | | |
| Wells Fargo Dealer Ser | vices | | On which er | ntry in Part 1 or F | art 2 | 2 did you list the original creditor? |
| Name Attn: Bankruptcy | | | Line | of (Check one): | | Part 1: Creditors with Priority Unsecured Claims |
| Number Street PO Box 19657 | | | _ | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Irvine | CA | 92623 | — Last 4 digits | of account num | ber | 1 9 9 1 |
| City | State | ZIP Code | | | | |
| Anothor oddroop | | | | | | |

Another address

Debtor 1 Robert R. Vela
Debtor 2 Sandy E. Vela

Case number (if known) _ 18-50979 SLJ

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|---|--------------|--------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. _ | ÷\$0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$0.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$753,684.28 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$753,684.28 |

| Fill in this information to identify your case: | | | | | | | | |
|--|----------------------|-------------------|-------------------|--|--|--|--|--|
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Name | | | | | |
| Debtor 2 (Spouse, if filing) | Sandy First Name | E. Middle Name | Vela Last Name | | | | | |
| United States Bankruptcy Court for the: NORTHERN DIST. OF CALIFORNIA | | | | | | | | |
| Case number (if known) 18-50979 SLJ | | | | | | | | |

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Official Form 106G Schedule G: Executory Contracts and Unexpired Leases
Case: 18-50979 Doc# 19 Filed: 05/29/18 Entered: 05/29/18 15:02:26 Page 39

| Fill in this information to identify your case: | | | | | | | | | |
|--|----------------------|-------------------|-------------------|--|--|--|--|--|--|
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Name | | | | | | |
| Debtor 2 (Spouse, if filing) | Sandy First Name | E. Middle Name | Vela Last Name | | | | | | |
| United States Bankruptcy Court for the: NORTHERN DIST. OF CALIFORNIA | | | | | | | | | |
| Case number (if known) | 18-50979 SLJ | | | | | | | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

page 1

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| 1. | Do y | ou h | nave any codebtors? | (If you are filing | a joint case, | do not list either | spouse a | as a codebtor.) |
|----|---------------|--------|---------------------------|----------------------|---------------|----------------------|-----------|---|
| | $ \sqrt{} $ | No | | | | | | |
| | | Yes | | | | | | |
| | ш | | | | | | | |
| 2. | With | nin th | ne last 8 years, have yo | ou lived in a com | munity prop | perty state or te | rritory? | (Community property states and territories |
| | inclu | ıde A | rizona, California, Idah | o, Louisiana, Nev | ada, New Me | exico, Puerto Ric | o, Texas | s, Washington, and Wisconsin.) |
| | П | No. | Go to line 3. | | | | | |
| | M | | . Did your spouse, form | nerspouse orlea | al equivalen | t live with you at | the time? | ? |
| | V | | No | ioi opodoo, oi iog | ai oquivaion | t iivo viitii you at | | • |
| | | Ц | | | | | | |
| | | abla | Yes | | | | | |
| | | | In which community st | ate or territory did | you live? | California | Fill | in the name and current address of that person. |
| | | | Sandv E. Vela | | | | | |
| | | | Name of your spouse, form | ner spouse, or legal | equivalent | | | - |
| | | | 40 Linden Road | | | | | _ |
| | | | Number Street | | | | | |
| | | | | | | | | - |
| | | | Watsonville | | CA | 95076 | | - |
| | | | City | | State | ZIP Code | | |
| | | | | | | | | |

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H

| Fill in this inform | odion to idont | · · · · · · · · · · · · · · · · · · · | | | | | | |
|---|--|--|---|--------------------|-------------------------|---|-------------|-----------------------|
| Fill in this inforn | nation to ident | ity your case: | | | | | | |
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Name | | | | | |
| | | | | | Che | eck if this is: | | |
| Debtor 2 (Spouse, if filing) | Sandy First Name | E. Middle Name | Vela Last Name | | — – | An amended filing | | |
| United States Bankı | ruptcy Court for the | : NORTHERN | DIST. OF CALIF | ORNIA | □ | A supplement show chapter 13 income a | • | |
| Case number (if known) | 18-50979 SLJ | | | _ | | | | mowing date. |
| , |)CI | | | | | MM / DD / YYYY | | |
| Official Form 10 | | | | | | | | 40/45 |
| Schedule I: Yo | ur income | | | | | | | 12/15 |
| responsible for supply include information all about your spouse. If your name and case report 1: Description | oout your spouse more space is ne | If you are separ eeded, attach a se . Answer every q | ated and your spo parate sheet to th | use is no | t filing with y | ou, do not include i | nformatio | n |
| Fill in your emploinformation. | yment | | Debtor 1 | | | Debtor 2 or non-f | ilina snou | ISA |
| If you have more t job, attach a sepa with information al | rate page Emp | loyment status | ✓ Employed✓ Not employed | ed | | ✓ Employed✓ Not employed | | |
| additional employe | ers. Occi | upation | Manager | | | Real Estate Age | ent | |
| Include part-time, or self-employed v | | loyer's name | MOVE Capital, | LLC | | County of Sant | a Clara | |
| Occupation may ir student or homem applies. | p | loyer's address | 1961 Main St., Number Street | #134 | | 70 W. Hedding Number Street | Street | |
| | | | Watsonville City | CA State | 95076 e Zip Code | San Jose | | 95110 Zip Code |
| | How | long employed th | | | | Started 04 | | |
| Part 2: Give D | Details About N | onthly Incom | e | | | | | |
| Estimate monthly inco | ome as of the date | you file this forn | | ing to repo | ort for any line | e, write \$0 in the spac | e. Include | your |
| non-filing spouse unles If you or your non-filing | | | er, combine the info | ormation for | or all emplove | rs for that person on | the lines b | elow. If |
| you need more space, | • | | ., | | | , , , , , , , , , , , , , , , , , , , | | |
| | | | | For | Debtor 1 | For Debtor 2 or non-filing spou | | |
| List monthly gros payroll deductions would be. | ss wages, salary,). If not paid mont | | | 2 | \$0.00 | \$5,936.32 | - | |
| 3. Estimate and list | monthly overtime | pay. | | 3. + _ | \$0.00 | \$0.00 | _ | |
| 4. Calculate gross i | ncome. Add line | 2 + line 3. | | 4. | \$0.00 | \$5,936.32 | _ | |

Case number (if known) 18-50979 SLJ

| Copy line 4 here | |
|---|------------|
| 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$1,262.88 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$356.18 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$89.05 5h. Other deductions. Specify: See continuation sheet 5h.+ \$0.00 \$86.45 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f 6. \$0.00 \$1,794.56 5g + 5h. 7. \$0.00 \$4,141.76 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm 8a. \$1,680.00 \$0.00 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. \$0.00 \$0.00 8e. Social Security <td< td=""><td></td></td<> | |
| 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$1,262.88 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$356.18 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$88.05 5h. Other deductions. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$0.00 \$1,794.56 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$0.00 \$1,794.56 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$0.00 \$1,794.56 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$4,141.76 8a. Net income regularly received: 8a. \$1,680.00 \$0.00 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support p | |
| 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$356.18 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$89.05 5h. Other deductions. Specify: See continuation sheet 5h. + \$0.00 \$86.45 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$0.00 \$1,794.56 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$4,141.76 8. List all other income regularly received: 8a. \$1,680.00 \$0.00 8a. Net income from rental property and from operating a business, profession, or farm 8a. \$1,680.00 \$0.00 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorc | |
| 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. \$0.00 \$889.05 5h. Other deductions. Specify: See continuation sheet 5h. + \$0.00 \$86.45 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$1,794.56 8a. Net income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 | |
| 5d. Required repayments of retirement fund loans 5e. Insurance 5e. \$0.00 \$0.00 \$1.00 \$5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify: See continuation sheet 5h. Other deductions. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 | |
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| 5g. Union dues 5h. Other deductions. Specify: See continuation sheet 5h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Unemployment compensation see Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$80. \$0.00 \$80. \$0.00 \$0.00 | |
| 5g. Union dues 5h. Other deductions. Specify: See continuation sheet 5h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Unemployment compensation see Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$80. \$0.00 \$80. \$0.00 \$0.00 | |
| Sh. Other deductions. Specify: See continuation sheet Specify: Sh. + \$0.00 \$1,794.56 Specify: See continuation sheet Specify: See continuation sheet Specify: Sh. + \$0.00 \$1,794.56 Specify: See continuation sheet Specify: Sh. + \$0.00 \$1,794.56 Specify: See continuation sheet Specify: Sh. + \$0.00 \$1,794.56 Sh | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$0.00 \$1,794.56 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. \$0.00 \$0.00 | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$4,141.76 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$4,141.76 8a. \$0.00 \$0.00 \$0.00 | |
| 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 | |
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| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$0.00 \$0.00 | |
| Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:8f8f80.00\$0.00 | |
| cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:8f8f80.00 | |
| | |
| 0 B 1 11 11 11 0 A A A A | |
| 8g. Pension or retirement income 8g. \$0.00 \$0.00 | |
| 8h. Other monthly income. | |
| Specify: Broker commissions 8h.+ \$0.00 \$4,000.00 | |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9 | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | .76_ |
| 11. State all other regular contributions to the expenses that you list in Schedule J. | |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. | |
| Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | |
| Specify: 11. + | .00_ |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, | <u>.76</u> |
| if it applies. Combined monthly inco | ome |
| 13. Do you expect an increase or decrease within the year after you file this form? | |
| □ No. See continuation sheet. | |
| Yes. Explain: | |

| | Additional Employers | Debtor 1 | | | Debtor 2 or non | -filing spouse | |
|----|-------------------------|-----------------------|-------|----------|-----------------|-----------------------------------|----------|
| | Occupation | Manager | | | Manager | | |
| | Employer's name | VS Development, LLC | | | VS Developme | ent, LLC | |
| | Employer's address | 1961 Main St., #134 | | | 1961 Main St., | #134 | |
| | | Watsonville | CA | 95076 | Watsonville | CA | 95076 |
| | | City | State | Zip Code | City | State | Zip Code |
| | How long employed th | ere? 3 years | | · | 3 year | rs | · |
| | Occupation | | | | CEO | | |
| | Employer's name | | | | Vela Estates, I | nc. | |
| | Employer's address | | | | 40 Linden Rd. | | |
| | | | | | Watsonville | CA | 95076 |
| | | City | State | Zip Code | City | State | Zip Code |
| | How long employed the | ere? | | | 5 year | rs | |
| | | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| h. | Other Payroll Deduction | ons (details) | | | | | |
| | Disability | | | | | \$59.37 | |
| | Mandatory Retiree N | Med Liability Contrib | | | | \$27.08 | |
| | | | | Totals | \$0.00 | \$86.45 | |

13. Expected increase or decrease within the year after you file this form:

Co-debtor estimates \$18,000.00 in commissions in the next 4-6 months. Co-debtor's commission income is very sporadic. Co-debtor receives passthrough KI income as well from their companies. Debtor only receives passthrough K1 income from their companies.

| Debtor 1 Debtor 2 | Robert R. Vela Sandy E. Vela | | Case number (if known) | 18-50979 SLJ |
|----------------------|---------------------------------|---------------------------|------------------------|--------------|
| 8a. Attach | ed Statement (Debtor 1) | | | |
| | | Rent 2nd home on property | | |
| Gross Mo | onthly Income: | | | \$1,880.00 |
| Expense | | Category | Amount | |
| Alternative | e septic maintenance | Maintenance | \$200.00 | |
| Total Mor | nthly Expenses | | | \$200.00 |
| Net Mont | hly Income: | | | \$1,680.00 |

Official Cars 4.0618-50979 Doc# 19 Filed: 65/259/18 15:02:26 Page 44 of Page

| | mation to iden | | | | Check if this | | |
|--|---|--|-----------------|---|----------------|---------------------------------|------------------------------|
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Na | ame | ш. | ended filing plement showing | nostnetition |
| Debtor 2 | Sandy | E. | Vela | | | er 13 expenses a | |
| (Spouse, if filing) | First Name | Middle Name | Last Na | ame | followi | ng date: | |
| United States Bank | ruptcy Court for th | ne: NORTHERN DI | ST. OF CA | LIFORNIA | <u></u> | DD / YYYY | |
| Case number (if known) | 18-50979 SLJ | J | | | | | |
| fficial Form 10 |)6J | | | | | | |
| chedule J: Y | our Expens | es | | | | | 12/ |
| rrect information. | lf more space is r | ble. If two married peneeded, attach anothenswer every question. | er sheet to | • • | | | |
| Part 1: Descr | ibe Your Hous | sehold | | | | | |
| Is this a joint cas | e? | | | | | | |
| <u> </u> | Debtor 2 live in a | separate household? | | es for Separate Housel | hold of Debtor | · 2. | |
| Do you have dep | endents? |] No | | | | | |
| Do not list Debtor Debtor 2. | 1 and | Yes. Fill out this inf for each dependent | | _ | | Dependent's age | Does depended live with you? |
| December 11 | | | | Son | | 14 | - ☑ Yes |
| Do not state the onames. | ependents | | | Daughter | | 8 | □ No - ☑ Yes |
| | | | | Son | | 20 | □ No - ☑ Yes |
| | | | | | | | □ No - □ Yes |
| | | | | | | | □ No |
| | | | | | | | Yes |
| Do your expense expenses of peo | | ☑ No | | | | | |
| yourself and you | | Yes | | | | | |
| | | | | | | | |
| | | oing Monthly Exp | | | | | |
| | ses as of your bar | | - | are using this form as a supplemental Sche | | • | |
| timate your expens | | | | | | | |
| timate your expenses as form and fill in the | e applicable date. d for with non-ca | | - | | | Your expens | ses |
| timate your expensive port expenses as form and fill in the lude expenses paich assistance and | e applicable date. d for with non-ca have included it o me ownership ex | sh government assis | ncome (Offi | | | Your expens | ses \$3,236.1 |
| timate your expensive port expenses as form and fill in the lude expenses paich assistance and | e applicable date. d for with non-ca have included it o me ownership ex gage payments and | ish government assis on Schedule I: Your Ir penses for your resid | ncome (Offi | | | | |
| report expenses as form and fill in the lude expenses paich assistance and The rental or hollinclude first morto. | e applicable date. d for with non-ca have included it o me ownership ex gage payments and line 4: | ish government assis on Schedule I: Your Ir penses for your resid | ncome (Offi | | | | |
| report expenses as form and fill in the lude expenses paich assistance and The rental or hol Include first mortour for included in 4a. Real estate the report expenses are reported to the rental or hold and | e applicable date. d for with non-ca have included it o me ownership ex gage payments and line 4: | sh government assis on Schedule I: Your Ir penses for your resid d any rent for the grour | ncome (Offi | | | 4 | |
| report expenses as form and fill in the clude expenses paich assistance and The rental or hol Include first mortour form included in 4a. Real estate of 4b. Property, ho | e applicable date. d for with non-ca have included it of me ownership exp gage payments and in line 4: taxes meowner's, or rent | sh government assis on Schedule I: Your Ir penses for your resid d any rent for the grour | ncome (Offi | | | 44a | |

Case number (if known) 18-50979 SLJ

| | | | Your expenses | |
|-----|---|---|---------------|---|
| 5. | Additional mortgage payments for your residence, such as | home equity loans | 5 | |
| 6. | Utilities: | | | |
| | 6a. Electricity, heat, natural gas | | 6a. | \$250.00 |
| | 6b. Water, sewer, garbage collection | (See continuation sheet(s) for details) | 6b | \$175.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | (See continuation sheet(s) for details) | 6c | \$350.00 |
| | 6d. Other. Specify: Security | | 6d. | \$75.00 |
| 7. | Food and housekeeping supplies | (See continuation sheet(s) for details) | 7. | \$1,140.00 |
| 8. | Childcare and children's education costs | (See continuation sheet(s) for details) | 8. | \$1,760.91 |
| 9. | Clothing, laundry, and dry cleaning | | 9. | \$200.00 |
| 10. | Personal care products and services | | 10. | \$50.00 |
| 11. | Medical and dental expenses | | 11. | \$100.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$1,000.00 | |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | | |
| 14. | Charitable contributions and religious donations | 14. | | |
| 15. | Insurance. Do not include insurance deducted from your pay or included i | n lines 4 or 20. | | |
| | 15a. Life insurance | | 15a | |
| | 15b. Health insurance | | 15b. | |
| | 15c. Vehicle insurance | | 15c | \$576.00 |
| | 15d. Other insurance. Specify: | | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or include Specify: Taxes on comission income | uded in lines 4 or 20. | 16. | \$1,200.00 |
| 17. | Installment or lease payments: | | <u> </u> | • • • • • • • • • • • • • • • • • • • |
| | 17a. Car payments for Vehicle 1 Car loan | | 17a. | \$837.59 |
| | 17b. Car payments for Vehicle 2 Car loan | | 17b. | \$541.36 |
| | 17c. Other. Specify: | | 17c | |
| | 17d. Other. Specify: | | | |
| 18. | Your payments of alimony, maintenance, and support that deducted from your pay on line 5, Schedule I, Your Income | you did not report as | | |
| 19. | Other payments you make to support others who do not live. Specify: | ve with you. | 19. | |

| | otor 1 otor 2 | Robert R. Vela Sandy E. Vela | Case number (if known) | 18-50979 SLJ |
|-----|------------------|---|-------------------------|-----------------|
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | \$50.00 |
| | 20e. | Homeowner's association or condominium dues | 20e | |
| 21. | Othe | r. Specify: See continuation sheet | 21. + | \$666.17 |
| 22. | Calcu | ulate your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a | \$12,208.18 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$12,208.18 |
| 23. | Calcu | ulate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$9,821.76 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ _ | \$12,208.18 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | (\$2,386.42) |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you f | ile this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do you ex ent to increase or decrease because of a modification to the terms of your mortgage | . , | |
| | = | No. Yes. Explain here: Mortgage payment includes property taxes and property insurance modification. Have health insurance with co-debtor's new job. 20 college and does not work currently so parents pay all expenses | year old son lives at h | ome and attends |

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| Debtor 1 Robert R. Vela Debtor 2 Sandy E. Vela | Case number (if known) | 18-50979 SLJ |
|---|------------------------|----------------------|
| b. Water, sewer, garbage collection (details): Garbage | | \$75.00 |
| Water &sewer | | \$100.00 |
| water asewer | | φ100.00 |
| | Total: | \$175.00 |
| Sc. Telephone, cell phone, Internet, satellite, and cable services (details): | | |
| Cell phones | | \$250.00 |
| Cable | | \$100.00 |
| | Total: | \$350.00 |
| 7. Food and housekeeping supplies (details): | | |
| Food | | \$1,000.00 |
| Food away from home | | \$100.00 |
| Housekeeping supplies | | \$40.00 |
| | Total: | \$1,140.00 |
| B. Childcare and children's education costs (details): | | |
| School tuition 8 year old daughter | | \$580.00 |
| School tuition 14 year old son | | \$1,180.91 |
| | Total: | \$1,760.91 |
| | | |
| 21. Other. Specify: | | ¢450.00 |
| Pets Maintance fee- timeshare | | \$150.00 \$141.17 |
| Son- 20 years old | | \$300.00 |
| Grooming | | \$75.00 |
| Grooming | | φ. σ.σσ |

| Fill in this information to identify your case: | | | | |
|--|----------------------|-------------------|-------------------|--|
| Debtor 1 | Robert First Name | R. Middle Name | Vela Last Name | |
| Debtor 2 (Spouse, if filing) | Sandy First Name | E. Middle Name | Vela Last Name | |
| United States Bankruptcy Court for the: NORTHERN DIST. OF CALIFORNIA | | | | |
| Case number (if known) | 18-50979 SLJ | | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

page 1

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | | | | |
|--|---|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | |
| ☑ No | | | | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| | | | | | |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | |
| X /s/ Robert R. Vela | X /s/ Sandy E. Vela | | | | |
| Robert R. Vela, Debtor 1 | Sandy E. Vela, Debtor 2 | | | | |
| Date <u>05/29/2018</u> | Date 05/29/2018 | | | | |
| MM / DD / YYYY | MM / DD / YYYY | | | | |

Official Form 106Dec Declaration About an Individual Debtor's Schedules Case: 18-50979